ACTION MEMORANDUM

To:	Chief of Mission or Designee	
Thru:	Human Resource Officer	
From:		
	Last Name	Initial First Name
Subject:	Request Authorization for Outside Employment under 3 FAM 4125	
Date:	QQQQQQQ	
employment such employ deemed una	d: 3 FAM 4125 requires that a spouse or family met or undertake other outside activity as described in family ment (1) would violate the law of the country, (2) acceptably broad by the Chief of Mission, or (3) contermined by the Chief of Mission.	would require a waiver of diplomatic immunity
I,	, spouse of	
with	agency, hereby request approval to work in the capacity as:	
Title:		
Company:		
Work Loca	ation:	
Brief Desc	ription:	
Family Me	mber Signature:	Date:
Mission Au	uthorizations:	
Approved:	Disapproved: Please select on	e)
Human Resource Officer Approved: Da		Date:
Chief of M	ission/Designee Signature:	Date: